

## HRIS Task Step Chart New Participant Administrative Enrollment

### Step #

**NOTE: All information MUST be entered in ALL CAPITAL LETTERS.**

Lawson portal - Dependent (XH13.1) - Microsoft Internet Explorer

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Address <https://portal.hris.state.az.us/lawson/portal/> Go

HRIS State of Arizona

DEPENDENT (XH13.1)

Go To Preferences Help

xh13.1 Add Change Delete Inquire Next Previous

Home Depend...

Data Directory

1) Company:  
2) Employee:  
3) Dependent:

Related Pages

Main  
Address  
Benefits Analysis  
Coverage

Main

Company: 3 STATE OF ARIZONA

Employee: 4

Dependent: 5

Last Name:

First Name, MI:

Status: A Active

Social Nbr:

Employee Address: Home

Relationship:

Consent: Not Applicable

1. Each step of the **New Participant Enrollment** chart corresponds with a red circle in each figure.
2. If the participant is not currently enrolling any dependents, **Skip to Step #25.** Start with the **Dependent Form (XH13.1)**.
3. **Company:** Select the appropriate **Company** from the drop down menu. Enter "1" for **Active** employees or "7" for **University** employees or **Retirees**.
4. **Employee:** Enter the **Employee's Identification Number (EIN)**.
5. **Dependent:** Click on the drop down menu next to dependents. This will display the employee's existing dependents. If the employee has no existing dependents, "**No records meeting criteria**" will be displayed on the gray window frame in the bottom left-hand corner. Next, click **Close** on the blue tool bar at the top of the window. Enter the dependents sequentially, starting with "1," in the dependent box.

Lawson portal - Dependent (XH13.1) - Microsoft Internet Explorer

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HRIS State of Arizona

DEPENDENT (XH13.1)

Go To Preferences Help

xh13.1 Add Change Delete Inquire Next Previous

Home Depend...

Data Directory

1) Company:

2) Employee:

3) Dependent:

Related Pages

Main

Address **9**

Benefits Analysis

Coverage

Main

Company:  STATE OF ARIZONA

Employee:

Dependent:

Last Name:    **6**

First Name, MI:   **7**

Status:  Active

Social Nbr:

Employee Address:  Home

Relationship:  **8**

Consent:  Not Applicable

Done

Start

Launch Outlook Express

Internet

9:47 AM

6. **Last Name:** Enter the dependent's last name in the second text box to the right of the **Last Name** label. If the dependent has a suffix (e.g., Jr., III), **enter** this information in the third text box using the drop down menu.
7. **First Name, M.I.:** Enter the dependent's first name and middle initial in the separate boxes provided.
8. **Relationship:** Select the relationship of the dependent to the employee from the drop down menu (i.e., **CHILD**, **GUARDIAN**, **PLACEADOPT**, **SPOUSE**, or **STEPCHILD**).
9. If the dependent's and employee's addresses are the same, **skip to step #16**. If the dependent's address is different from the employee's address, **click** on **Address** under the **Related Pages** link on the left of the page.

Lawson portal - Dependent (XH13.1) - Microsoft Internet Explorer

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Address: https://portal.hris.state.az.us/lawson/portal/

HRIS State of Arizona DEPENDENT (XH13.1)

Go To Preferences Help

kb131 Add Change Delete Inquire Next Previous

Home Depend...

Data Directory

1) Company: 1

2) Employee: 1

3) Dependent: 1

Related Pages

Main

Address 16

Rec Address Coverage

Company: STATE OF ARIZONA

Employee:

Dependent:

Address

Address 1: 10

Address 2:

Address 3:

Address 4:

City or Address 5: 11

State or Province: 12

Postal Code: 13

Country: 14

Telephone: 15

Work Telephone:

10. **Address Line 1-4:** Enter participant's address in the first line, and if it does not fit, use the extra lines provided. **Do not use punctuation.**
11. **City or Address Line 5:** Enter the full city name without abbreviations.
12. **State:** Enter the state using the standard two-letter State abbreviations (e.g., **AZ, CA, WY**)
13. **Postal Code:** Enter the five-digit zip code.
14. **Country:** Enter the country of residence, using **US** as the abbreviation for United States.
15. **Telephone:** This entry is **optional**. If entered, use the second text field to the right. The telephone number should be in the following format: **602.542.1234**.
16. Click on **Benefits Analysis** in the **Related Pages** link on the left of the page.

Lawson portal - Dependent (XH13.1) - Microsoft Internet Explorer

File Edit View Favorites Tools Help

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Address <https://portal.hris.state.az.us/lawson/portal/> Go

HRIS State of Arizona DEPENDENT (XH13.1) Go To Preferences Help

kh131 Add Change Delete Inquire Next Previous

Home Depend...

Data Directory

1) Company: 1  
2) Employee:  
3) Dependent:

Related Pages

Main  
Address  
Benefits Analysis  
Coverage 22

Company:   
Employee:   
Dependent:

Benefits Analysis

Spouse or Dependent:   
Birthdate:  Age:  
Adoption Date:   
Placement Date:   
Gender:   
Smoker:   
Student:   
Disabled:   
Deceased:  Date Of Death:

Done

Start

Internet 9:47 AM

17. **Spouse or Dependent:** Select from the drop down menu, or enter "S" for **Spouse**, or "D" for **Dependent**.
18. **Birthdate:** Enter the birthdate for the dependent. This is a **required field**, and the format for the dependent's birthdate should be as follows: **MMDDYYYY** (i.e. **02202003**).
19. **Gender:** Select "**M**" for **Male**, or "**F**" for **Female** from the drop down menu.
20. **Student:** This defaults to "**No**". Change to "**Yes**" **only if**, the dependent is not the spouse, over 18 years old, and a full time student.
21. **Disabled:** This defaults to "**No**." Change **only if applicable**.
22. Click on **Coverage** in the **Related Pages** link on the left of the page.

Lawson portal - Dependent (X013.1) - Microsoft Internet Explorer

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HRIS State of Arizona

DEPENDENT (X013.1)

Welcome, YURI S BAHTI

Go To Preferences Help

kh131

Add Change Delete Inquire Next Previous

Home Depend...

24

Data Directory

1) Company: 1

2) Employee:

3) Dependent:

Related Pages

Main

Address

Benefits Analysis

Coverage

Company: STATE OF ARIZONA

Employee:

Dependent:

Coverage

Prior Months Cov:

Primary Care Physician:

Established Patient:

Health:

Dental:

Life:

Medicare Indicator:

23

Benefits

Done

Start

Internet

9:47 AM

23. **Medicare Indicator:** This is defaulted to "No Medicare". If applicable, **select** the appropriate item from the drop down menu. The default is "E" for "No Medicare." Select "A" for "Medicare Part A," "B" for "Medicare Part B," "C" for "Medicare Part A and B," "D" for "Medicare Part Unknown," or "E" for "No Medicare."
24. **Click Add** on the blue tool bar. This will display "Add complete, continue" in the gray, bottom left-hand frame of the window. Once all dependents have been added, **continue** to **Step #25**. To add multiple dependents, **click Main** in the **Related Pages** link on the left of the page, **enter** the next sequential number (for example if the first dependent you entered was dependent number 1, the next dependent would be number 2), and **repeat Steps #5-#24** for each subsequent dependent to be enrolled. This completes the steps to add the dependent(s).

Lawson portal - Employee Benefit Entry (BN31.2) - Microsoft Internet Explorer

File Edit View Favorites Tools Help

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Address: https://portal.hris.state.az.us/lawson/portal/

HRIS State of Arizona

EMPLOYEE BENEFIT ENTRY (BN31.2)

Go To Preferences Help

BN31.2 25 Add Inquire Next PageDown PageUp Previous

Home Employee...

Data Directory

1) Company:

2) Employee:

Related Links

Speed Benefit Entry

Employee Benefit Changes

Employee Benefit Detail Changes

Benefit Plan

Beneficiaries

Savings Bond Beneficiaries

Savings Bond Purchase Sequence

Employee Benefit Report

Company: 26 STATE OF ARIZONA

Employee: 27

As of date:

Plan Type: 28

FC	* Tp	Plan	Description	Eligible	Start	Opt	Mult	Cov, PayPer	Sal, Annual

More... HIPAA

Pct, Amt Pre, Aft Smk EOI Pre-Tax Aft-Tax Stop Date

Benef SB Benef Comments Comments

25. When all dependents have been added, go to the *Employee Benefit Entry (BN31.2)* page by typing *BN31.2* in the text box in the top left-hand corner of the window, and press **Enter**. **NOTE:** If participant has elected to **decline coverage** of a certain plan, they **must be enrolled in the decline plan for that coverage**. If the employee information (employee's name, EIN, and company) is already displayed at the top of the page, **skip to Step #28**.
26. **Company:** Select **Company** from the drop down menu. Enter "1" for Active employees or "7" for University employees or Retirees.
27. **Employee:** Enter the **Employee Identification Number (EIN)**.
28. **Plan Type:** Select the combination of plan types for all plans that apply to the employee's enrollment form from each drop down menu.
29. **Click Inquire** on the blue tool bar. This will display the selected plan types in the appropriate fields.



Lawson portal - Employee Benefit Entry (BN31.2) - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address: https://portal.hris.state.az.us/lawson/portal/

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**EMPLOYEE BENEFIT ENTRY (BN31.2)**

Go To Preferences Help

BN31.2 Add Inquire Next PageDown PageUp Previous

Home Employ...

**Data Directory**

1) Company:  
2) Employee:

**Related Links**

Speed Benefit Entry  
Employee Benefit Changes  
Employee Benefit Detail Changes  
Benefit Plan  
Beneficiaries  
Savings Bond Beneficiaries  
Savings Bond Purchase Sequence  
Employee Benefit Report

Company: STATE OF ARIZONA  
Employee: 11111 EMPLOYEE NAME  
As of date: 02/09/2004 111-11-1111  
Plan Type: HL DN EL DL DI RS SB DC DB SP VA

FC	* Tp	Plan	Description	Eligible	Start	Opt	Mult	Cov,PayPer	Sal,Annual
30	L	AVES	AVESIS VISION	10/01/01	31	32			
	L	CAMA	CIGNA MARICOPA	10/01/01					
	L	WHLT	DECLINE MEDICAL	10/01/01					
	L	WVIS	DECLINE VISION	10/01/01					
	DN	DLTA	DELTA DENTAL	10/01/01					
	DN	EDSD	EDS DENTAL	10/01/01					
	DN	FORT	FORTIS DENTAL	10/01/01					
	DN	METD	METLIFE DENTAL	10/01/01					
	DN	WDNT	DECLINE DENTAL	10/01/01					
	EL	BASC	BASIC LIFE	10/01/01					
	EL	SLPT	SUP LIFE STAND	10/01/01					

More... **33** **HIPAA**

Pct,Amt Pre,Aft Smk EOI Pre-Tax Aft-Tax Stop Date

Benef SB Benef Comments Comments

More Records Exist - Use PageDown

30. **FC:** Enter or type "A" or select "Add" on each line to add the plan on that line.
31. **Start:** Enter the **Effective Start Date (MMDDYYYY)**, which is the 1<sup>st</sup> of the next month after the date of hire for new hires.
32. **Opt:** Enter the option number that corresponds to the plan elected by the employee. If you do not know the option code, use the "DRILL" option by right clicking in the option box and selecting the appropriate option.
33. If you are **not** adding a **Medical, Dental, or Vision** plan, **Skip to Step #37**. Otherwise, make sure each medical, dental and vision plan (if elected) is highlighted in brown before completing the **HIPAA** transaction, by **clicking** on the blue **HIPAA** tab at the bottom of the page. This applies to all selections of **Medical, Dental, and Vision** coverage. A **HIPAA** transaction must be completed for the **Medical, Dental, and Vision** plan(s) before completing the next step.

Lawson portal - Employee Benefit Entry (BN31.2) - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address: https://portal.hris.state.az.us/lawson/portal/

HRIS State of Arizona

EMPLOYEE BENEFIT ENTRY (BN31.2)

Go To Preferences Help

BN31.2 Add Inquire Next PageDown PageUp Previous

Home Employ...

Data Directory

1) Company:

2) Employee:

Related Links

Speed Benefit Entry

Employee Benefit Changes

Employee Benefit Detail Changes

Benefit Plan

Beneficiaries

Savings Bond Beneficiaries

Savings Bond Purchase Sequence

Employee Benefit Report

Company: 1 STATE OF ARIZONA

Employee: 11111 EMPLOYEE NAME

As of date: 02/09/2004 111-11-1111

Plan Type: HL DA EL DL DI RS SB DC DB SP VA

FC	* Tp	Plan	Description	Eligible	Start	Opt	Mult	Cov	PayPer	Sal,Annual
37	HL	AVES	AVESIS VISION	10/01/01	02/01/2004	32				
	HL	CAMA	CIGNA MARICOPA	10/01/01						
	HL	WHLT	DECLINE MEDICAL	10/01/01						
	HL	WVIS	DECLINE VISION	10/01/01						
	DN	DLTA	DELTA DENTAL	10/01/01						
	DN	EDSD	EDS DENTAL	10/01/01						
	DN	FORT	FORTIS DENTAL	10/01/01						
	DN	METD	METLIFE DENTAL	10/01/01						
	DN	WDNT	DECLINE DENTAL	10/01/01						
	EL	BASC	BASIC LIFE	10/01/01						
	EL	SLPT	SUP LIFE STAND	10/01/01						

More... HIPAA

Create Transaction Reason Member ID

34 Y Yes 35 28 Initial Enrollment 36 2 EE or Dep Number

Benef SB Benef Comments Comments

More Records Exist - Use PageDown

Internet

34. **Create Transaction:** Select or enter "Y" for "Yes." **Note:** Health, Dental, and Vision plans must select "Y."
35. **Reason:** Select the appropriate reason from the drop down menu. For a new participant, type "28" or select "Initial Enrollment" from the drop down menu.
36. **Member ID:** Type "2" or select "EE or Dep Number" from the drop down menu. **Do not select "1" for "SSN."**
37. If a participant has elected to decline a plan, **repeat Steps #30-#37** to enroll the participant in the declined plan (i.e. **DECLINE MEDICAL, DECLINE VISION, DECLINE DEPLIFE**, etc.). You **do not** need to complete a HIPAA transaction if the participant is enrolling in a **decline plan**.
38. **Click the Add button** in the blue tool bar at the top of the window. This will display "**Add complete, continue**" in the gray, bottom left-hand frame of the window. This completes the plan enrollment steps. If you are **NOT adding dependents to the medical dental or vision plans**, skip to **Step #50**.



Lawson portal - Employee Benefit Entry (BN31.2) - Microsoft Internet Explorer

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Address: https://portal.hris.state.az.us/lawson/portal/

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**EMPLOYEE BENEFIT ENTRY (BN31.2)**

Go To Preferences Help

BN31.2 Add Inquire Next PageDown PageUp Previous

Home Employ...

**Data Directory**

1) Company:  
2) Employee:

**Related Links**

Speed Benefit Entry  
Employee Benefit Changes  
Employee Benefit Detail Changes  
Benefit Plan  
Beneficiaries  
Savings Bond Beneficiaries  
Savings Bond Purchase Sequence  
Employee Benefit Report

Company: 1 STATE OF ARIZONA  
Employee: 35011 EMPLOYEE NAME  
As of date: 02/09/2004 111-11-1111  
Plan Type: HL DN EL DL DI RS SB DC DB SP VA

FC	* Tp	Plan	Description	Eligible	Start	Opt	Mult	Cov	PayPer	Sal,Annual
A	HL	AVES	AVESIS VISION	10/01/01	02/01/2004	6				
A	HL	CAMA	CIGNA MARICOPA	10/01/01	02/01/2004	32				
	HL	WHLT	DECLINE MEDICAL	10/01/01						
	HL	WVIS	DECLINE VISION	10/01/01						
	DN	DLTA	DELTA DENTAL	10/01/01						
	DN	EDSD	EDS DENTAL	10/01/01						
	DN	FORT	FORTIS DENTAL	10/01/01						
	DN	METD	METLIFE DENTAL	10/01/01						
	DN	WDNT	DECLINE DENTAL	10/01/01						
	EL	BASC	BASIC LIFE	10/01/01						
	EL	SLPT	SUP LIFE STAND	10/01/01						

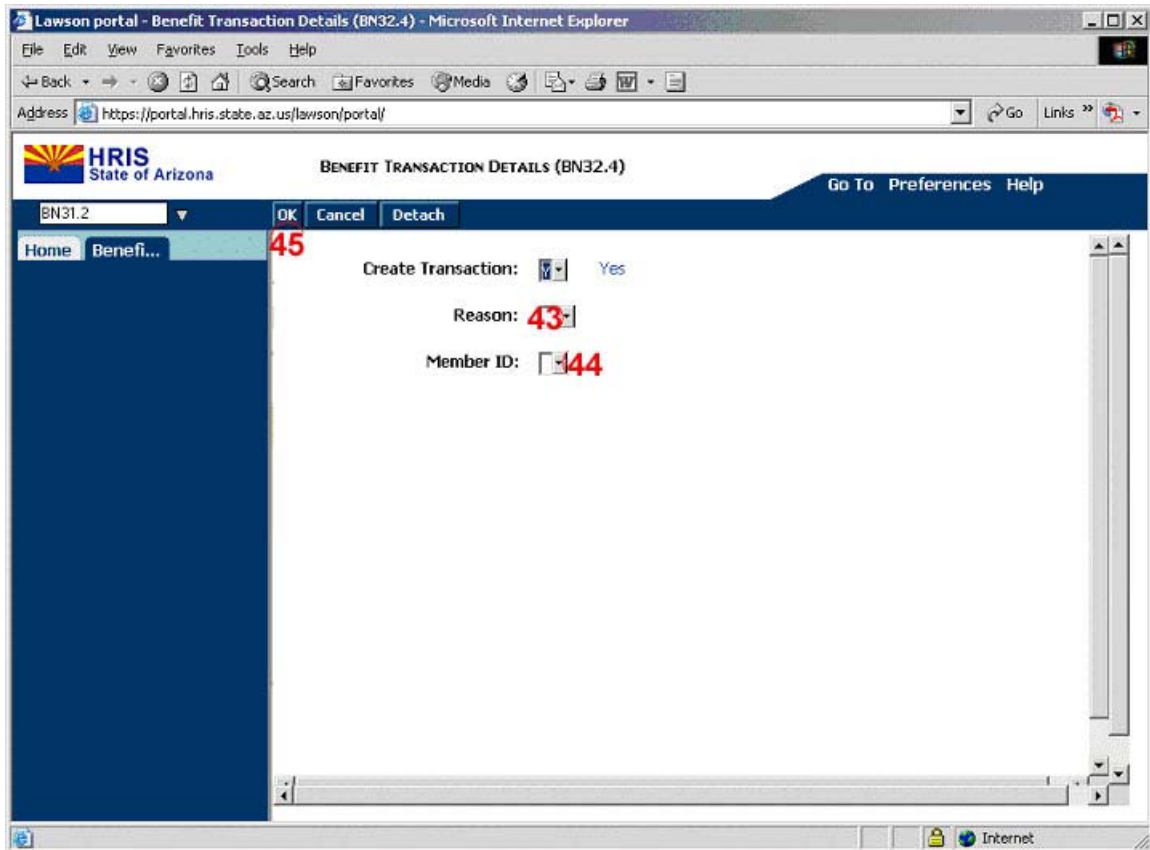
**39** More... HIPAA

Pct,Amt Pre,Aft Smk EOI Pre-Tax Aft-Tax Stop Date **40** Dep

Benef SB Benef Comments Comments

39. If you are enrolling **dependents**, click on the line of the particular plan to which you are adding them, to highlight that plan. Click on the blue **More** tab at the bottom of the page. At the end of the **More** tab is a **Dep** link.
40. Click on the **Dep** link to add dependents to each plan. This **Dep** link will take you to the *Dependent Benefits (HR13.3)* form which will allow you to add dependents.





- 43. **Reason:** Click or enter "28" or "Initial Enrollment" from the drop down menu.
- 44. **Member ID:** Enter "2" or select "EE or Dep Number" from the drop down menu. **Do not select "1" for SSN.**
- 45. **Click** the **OK** button on the blue tool bar at the top to return to the *Dependent Benefits* (HR13.3) form.



Lawson portal - Employee Benefit Changes (BN32.1) - Microsoft Internet Explorer

File Edit View Favorites Tools Help

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**EMPLOYEE BENEFIT ENTRY (BN31.2)**

Go To Preferences Help

BN31.2 Change Inquire Next PageDown PageUp Previous

Home Employ...

**Data Directory**

1) Company: 1  
2) Employee: 11111

**Related Links**

Employee Benefit Detail Changes  
Speed Benefit Entry  
Employee Benefit Entry  
Benefit Plan  
Beneficiaries  
Savings Bond Beneficiaries  
Savings Bond Purchase Sequence  
Employee Benefit Report

Company: 1 STATE OF ARIZONA  
Employee: 11111 EMPLOYEE NAME  
As of Date: 02/09/2004 111-11-1111  
Plan Type: HL DA EL DL DI RS SB DC DB SP VA

**50**

C	Tp	Code	Description	Start	Stop	Opt	Mult	Cov	PayPer	Sal,Annual	
HL	CAMA		CIGNA MARICOPA	10/01/2003		B2					HIPAA
Pct,Amt	A		Pre,Aft	SM	PT				1500.00	AT	EOI
											Dep*
											Add
HL	WVIS		DECLINE VISION	10/01/2003							EOI
Pct,Amt	A		Pre,Aft	SM	PT					AT	EOI
											Dep*
											Add
DN	DLTA		DELTA DENTAL	10/01/2003		I2					EOI
Pct,Amt	A		Pre,Aft	SM	PT				369.04	AT	EOI
											Dep*
											Add
EL	BASC		BASIC LIFE	10/01/2003						12000.00	EOI
Pct,Amt	A		Pre,Aft	SM	PT					AT	EOI
											Dep*
											Add
EL	WSPL		DECLINE SUPLIFE	10/01/2003							EOI
Pct,Amt	A		Pre,Aft	SM	PT					AT	EOI
											Dep*
											Add
DL	DPLF		DEPENDENT LIFE	10/01/2003		3					EOI
Pct,Amt	A		Pre,Aft	SM	PT				66.24	AT	EOI
											Dep*
											Add

[Benef](#) [SB Benef](#) [Comments](#)

**51**

50. After adding dependents or enrolling the employee in the applicable plans listed on the screen, click page down on the BN32.1 to continue benefit elections on the remaining plans.
51. After enrolling the employee and all dependents in the plans, **click** on the **Benef** link at the bottom of the form to access the *Beneficiaries (BN47.1)* form. The Beneficiary information must be entered be entered for the **Basic Life** and, if applicable, the **Sup Life** plans. If the employee information (**employee's name, EIN, and company**) is already displayed at the top of the page, **skip to Step #54**.



Lawson portal - Beneficiaries (BN47.1) - Microsoft Internet Explorer

Address: https://portal.hris.state.az.us/lawson/portal/

HRIS State of Arizona BENEFICIARIES (BN47.1)

Go To Preferences Help

Home Benefi...

Data Directory

1) Company: 1

2) Employee:

3) Benefit Type:

4) Plan:

Related Links

Speed Benefit Entry

Employee Benefit Entry

Employee Benefit Changes

Employee Benefit Total Change

Beneficiary Listing

Company: 1 52 STATE OF ARIZONA

Employee: 53

Benefit Type: 54

Plan: 55

FC	Type 57	Primary or Contingent 58	Percent Amount 59	Amount 60
56	Individual	Primary	Percent	

More Address

Last Name:

First Name:

Middle Initial:

Relationship:

Social Nbr:

Trust:

Comments:

52. **Company:** Select **Company** from the drop down menu. Enter "1" for Active employees or "7" for University employees and Retirees.
53. **Employee:** Enter the **Employee Identification Number (EIN)**.
54. **Benefit Type:** Enter or select "EL" from the drop down menu.
55. **Plan:** Enter or select the appropriate plan, according to the employee's enrollment form, from the drop down menu.
56. **FC:** Select or enter "A" to "Add" each beneficiary on separate lines.
57. **Type:** Make the applicable selection from the drop down menu. Enter or select "0" or select "Individual" for an individual beneficiary; enter or select "1" or "Trust" for a trust fund.
58. **Primary or Contingent:** Enter "1" or select "Primary" for a primary beneficiary; enter "2" or select "Contingent" for a contingent beneficiary.
59. **Percent or Amount:** Enter "P" or select "Percent" from the drop down menu. You must specify Percentage "P" (not amount).
60. **Amount:** Enter the percent amount. If there are multiple **primary** or **contingent** beneficiaries, the total amount of primary beneficiaries must equal 100%, and the total amount of contingent beneficiaries must equal 100%.

61. Click on the **More** tab at the bottom of the screen. This section must be completed for each beneficiary.
62. **Last Name:** Use the second field to enter the last name in the “**Last Name**” field. If dependent has a suffix (e.g., Jr., III), input this information in the third field.
63. **First Name:** Enter the first name in the “**First Name**” field.
64. **Middle Initial:** Enter the middle initial in the “**Middle Initial**” field.
65. If the beneficiary has a different address than the employee click on the address tab to enter the beneficiary’s address. You will be required to enter the country code for the address – enter “US” for the United States.

Lawson portal - Beneficiaries (BN47.1) - Microsoft Internet Explorer

Address: https://portal.hris.state.az.us/lawson/portal/

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**BENEFICIARIES (BN47.1)**

Go To Preferences Help

BN31.2

Close Detach **Add** Change Inquire Next PageDown PageUp Previous

Home Benefi...

**Data Directory**

- 1) Company:
- 2) Employee: 11111
- 3) Benefit Type: EL
- 4) Plan: BASC

**Related Links**

- Speed Benefit Entry
- Employee Benefit Entry
- Employee Benefit Changes
- Employee Benefit Detail Changes
- Beneficiary Listing

Company: 1 STATE OF ARIZONA

Employee: 11111 EMPLOYEE NAME

Benefit Type: EL Employee Life/AD&D

Plan: BASC BASIC LIFE - STANDARD

FC	Type	Primary or Contingent	Percent	Amount
A	Individual	1	Primary	100.00

**More** **Address**

**61** Last Name: **62**

First Name: **63** Middle Initial: **64**

Relationship: Social Nbr:

Trust:

Comments:

66. To add more beneficiaries, **repeat Steps #56-#66** for each beneficiary.
67. **Click** on the **Add** button on the blue tool bar at the top of the form. This will display “**Add complete, continue**” message in the bottom left-hand corner of the window.
68. If the participant has **more than one beneficiary plan**, **repeat Steps #52-#68** for each different plan, adding each beneficiary indicated.
69. **Click** the **Close** button on the blue tool bar at the top to close this form. This completes the new participant enrollment steps.